

Presidential Address

The History of Neurology in Belfast: The first hundred years

Presidential Address to the Ulster Medical Society, 13th October 2005

Stanley A Hawkins

I would like to tell the story of the development of neurology in Belfast. I wish to concentrate on the first century. Why do I say the first century? Having researched the beginnings, I was surprised to discover that the first physician with special training in neurology to practice in Belfast set up his brass plate as long ago as 1888. From 1888 to the late 1980's comprises the first hundred years of neurology in Belfast. This takes us up to the closure of Clarendon Street Hospital, and in-patient beds in Belfast City Hospital, with concentration of acute neurology beds at the Royal Victoria Hospital. I am not going to say much about my contemporaries or myself. I also feel more comfortable describing the talents and accomplishments of my predecessors whose lives have run their full course. There are many precedents for this.

PEOPLE AND PLACES

The story is essentially one of people and places. The people were pioneering individuals who formed teams and fruitful collaborations. The story concentrates on three very influential men – their publications were read and quoted extensively in the world of medicine and neurology. Two of them served as presidents of the Association of British Neurologists, Sydney Allison and Harold Millar. The third, Louis Hurwitz, surely would also have been accorded that honour, had he not died at the age of forty-five. All were gifted researchers, writers, clinicians and teachers. The places were the hospitals where they worked, and the stories of their development.

Dr Hugh Calwell succeeded Sydney Allison as honorary archivist at the Royal Victoria Hospital. He wrote an article on the initiation of neurology in Belfast based on Sydney Allison's collected papers.¹ The paper covers the foundation of the

clinics in Great Victoria Street and of Clarendon Street Hospital, extending up to 1948, the foundation of the National Health Service. I want to move the account forwards by forty years.

Sydney Allison published extensively on a wide range of topics but did not publish much concerning his personal feelings and experiences, when he was active professionally. I am grateful to John Allison his son, who copied some extracts of his father's extensive private diaries to help me with my background research. The papers contain frank personal views of hospital politics of his time. These have been quoted sensitively. I am also indebted to Mrs Sheila Millar who gave me collections of papers, slides and books belonging to Harold shortly after his death in 1993. Dr Natalie Hurwitz also gave me Louis' slide collection in the mid 1990's following a guest lecture in his honour given in 1996 by their close friend Prof P K Thomas, a past editor of *Brain*.

THE FIRST BELFAST NEUROLOGIST

The first physician in Belfast with specific neurological training was John McGee McCormac of Banbridge (*fig 1*). He entered Royal Belfast Academical Institution in 1860 and after two years there went on to Queen's College Belfast, as a medical student. In 1867 he qualified in Edinburgh with LRCP & S, and proceeded to gain his MD degree in Durham in 1885. He spent some time in London studying neurology and attended the National Hospital, Queen Square as a post-graduate student. This institution had been founded only a few years

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Figure 1. John McGee McCormac

earlier in 1860. Before he left London, he became one of the original members of the Neurological Society of London.

McCormac, on his return to Belfast in 1888, practiced from his own home at 29 Great Victoria Street. This was a location popular among other members of the medical fraternity, being on the then outskirts of the expanding city. The current layout of this part of Belfast is dramatically different, being the site of a modern commercial arcade leading to Glengall Street bus station. His neighbours included future eminent physicians such as HL McKissack and JA Lindsay, who later became professor of medicine. By 1889 McCormac's house had become "The Belfast Institution for Nervous Diseases, Paralysis and Epilepsy". In 1893 McCormac moved to the house next door leaving number 29 to the patients and in 1897 he and the institution moved to numbers 71 and 73 where they remained until his sudden death in 1913.

Active in Belfast medical and intellectual society, on his return to Belfast in 1888, he was a member of the Natural History and Philosophical Society. It is recorded that he read neurological papers at

the Northern Ireland Branch of the British Medical Association. It is of interest that within one year of Roentgen's discovery of X-ray apparatus in the session 1896-7 he gave a detailed account of the physics of the production of X-rays and described their use in examining bones, liver, kidneys and heart.

CLAREMONT STREET HOSPITAL

McCormac was also instrumental in the establishment of Claremont Street Hospital (*fig 2*) in 1896. It was initially called the "Victoria Hospital for Diseases of the Nervous System, Paralysis and Epilepsy" and was opened at number 14 Claremont Street. It was endowed and sponsored by a Miss Farrell, the daughter of a former rector of Dundonald, Co. Down. McCormac was its first physician. Miss Farrell suffered from a neurological illness, but it is not recorded what the nature of this illness was. The new hospital had male and female wards containing 15 beds altogether. The hospital was supported by a committee of management drawn from the members of the Belfast establishment. For example Lieutenant-General Geary presided over the Committee of Management during the year 1899 and Sir James Henderson DL succeeded him. The first surviving annual report covers the year ending 1904. Thirty-five in-patients were admitted. According to McCormac "31 were cured, 18 much benefited and 2 unchanged". In the 1909 report it is recorded that "cases of paralysis, melancholia, hypochondriasis, rheumatic neuritis, sciatica and chorea were treated with complete success and epileptics have been so greatly benefited that for years they have not suffered from any recurrence of attacks". I am sure our contemporary outcome statistics would not better that!

When John McGee McCormac died in 1913 he was described as the founder of the hospital, but credit was also given to Miss Farrell. Following McCormac's



Figure 2. Claremont Street Hospital

death John Thompson MD (RUI) LRCP London originally of Lisburn was appointed to succeed him. Thompson had been a student in Queen's College Belfast. He also studied in Dublin, London and Vienna. It was not unusual for undergraduate students in those days to migrate between several medical schools before graduation. This phenomenon was described in detail in Prof Richard Clarke's "Gary Love Lecture", delivered during the last year. Thompson's interests lay more in what we would now call functional disorders rather than organic nervous diseases.

In 1927 when the hospital was amalgamated with the Killowen Colony for Epileptics in Lisburn (*fig 3*), the title of the combined institutions was changed to the "Nervous Diseases Hospital and Epileptic Colony". Thompson reported good results "in treating epilepsy and most functional diseases were much improved by electrical treatment and the



Figure 3. Killowen Hospital

use of ultra-violet rays." The use of ultra-violet rays in medicine was controversial. He is recorded as deploring the "unscientific attitude" of the Medical Research Council in a report that cast doubt on the value of treatment of nervous diseases using ultra-violet light. He wrote that the report would "have the tendency to disturb the mind of the large number of patients receiving the treatment, and even if there were a psychological or faith healing element in the treatment, they have no right to criticise one of the most recent advances in medical science and shake the confidence of the public".

In 1926 Thomas Howard Crozier was appointed assistant physician to Claremont Street. He worked

in Claremont Street for only 2 years before moving on to the staff of the Royal Victoria Hospital. He remained on the staff of the Royal as a physician until his retirement. Crozier later recalled that when Thompson was interviewing him for the appointment in Claremont Street the conversation concerned religious and theological belief rather than medicine. In some of Sydney Allison's later writings, he recalled the liberal distribution of biblical texts throughout the hospital. Little remains in the archives of Thompson's time. By all accounts he was a diligent and caring physician. The Killowen Colony for Epileptics in Lisburn was housed in a property belonging to the Thompson family, which later was passed to the Health Service.

DR HILTON STEWART

In 1929 Howard Hilton Stewart (*fig 4*) was appointed assistant physician. He had been a registrar in the Hospital for the Paralysed and Epileptic in Maida Vale, London, where he had undergone neurological training. He was later appointed to the Ulster Hospital. In 1930 he applied for the post of assistant physician at the Royal Victoria Hospital. The book containing testimonials for his application is still preserved (*fig 5*). He received letters of support from Wilfred Harris, the Senior Physician in Maida Vale, Douglas MacAlpine and Russell Brain. Hilton Stewart was a son of Andrew William Stewart, a former editor of the Belfast Telegraph. His special interest lay in the follow up and control of patients suffering from epilepsy. Another particular interest was the management of psychoneurosis. After the National Health Act in 1948 he gave up general medicine and became a consulting neurologist. In 1956 he was appointed Clinical Lecturer and Examiner in Medicine in Queen's University in Belfast and joined the staff of the Royal. His publications include works on epilepsy, the mental consequences of head injuries and on Sydenham's chorea.²⁻⁵



Figure 4. Dr and Mrs Hilton Stewart

CONTENTS.

1. Letter of Application.

2. Testimonials from :—

- (1) W. W. D. THOMSON, ESQ., B.A., B.Sc., M.D., D.P.H., F.R.C.P. (Lond.)
*Professor of Medicine, Queen's University of Belfast.
Physician, Royal Victoria Hospital, Belfast.*
- (2) FOSTER COATES, ESQ., B.A., M.D., D.P.H.
*Physician, Royal Victoria Hospital, Belfast.
Consulting Physician, Forster Green Hospital, Belfast.
Member of Senate, Queen's University, Belfast.*
- (3) ROBERT MARSHALL, ESQ., M.D., D.P.H., F.R.C.P.I.
Physician, Royal Victoria Hospital and Ulster Hospital for Children and Women.
- (4) C. G. LOWRY, ESQ. M.D., F.R.C.S.
*Professor of Midwifery, Queen's University, Belfast.
Gynaecologist, Royal Victoria Hospital, Belfast.
Senior Consulting Surgeon, Belfast Maternity Hospital.
Consulting Surgeon to Ulster Hospital for Children and Women, Belfast.*
- (5) S. T. IRWIN, ESQ., B.A., M.Ch., F.R.C.S.
*Surgeon, Royal Victoria Hospital, Belfast.
Consulting Surgeon, Ulster Hospital for Children and Women, Belfast.*
- (6) WILFRED HARRIS, ESQ., M.D., F.R.C.P. (Lond.).
*Senior Physician, Hospital for Epilepsy and Paralysis, Maida Vale.
Senior Physician, St. Mary's Hospital, London.*
- (7) DOUGLAS MCALPINE, ESQ., M.D., M.R.C.P. (Lond.).
*Physician, Hospital for Epilepsy and Paralysis, Maida Vale.
Neurologist, Middlessex Hospital, London.*
- (8) W. RUSSELL BRAIN, ESQ. M.A., M.D., M.R.C.P. (Lond.).
*Assistant Physician, Hospital for Epilepsy and Paralysis, Maida Vale.
Assistant Physician, The London Hospital.*

Figure 5. Testimonials for Dr Hilton Stewart 1930

His South American wife, May Clara Dos Santos whom he married in 1930 pre-deceased him by 6 years in 1958. He never fully recovered from this loss. A very kind woman, she devoted her life to the welfare of the patients and staff in Claremont Street Hospital. The entry on Hilton Stewart in Munk's Roll (a record of particularly distinguished deceased fellows of the Royal College of Physicians of London) records that he was "a man of deep religious faith and an Elder of the Kirk. Religion was in his heart rather than his tongue. Throughout his life his friends were drawn to him by his wit and his consideration for others." Following his death in 1963 a library was founded in Claremont Street Hospital as a tribute to his memory, based on his personal collection of books and journals. This remarkable occasion was well attended. Photographs of the occasion still exist, as does a collection of autographs of those who attended, including Dr MacDonald Critchley, who had travelled from London for the occasion. The dean of the medical school at Queen's Professor (later Sir) John Henry Biggart, was also present. As a young man he published a textbook on neuropathology.⁶

DR SYDNEY ALLISON

Dr Sydney Allison was born on 15th May 1899 (fig 6) in 7 Wellington Park Avenue, Belfast. His father, William Locock Allison, an Englishman from Bradford was a fashionable society photographer. He had a studio in Donegall Place in Belfast opposite the City Hall. Sydney was educated at the Royal Belfast Academical Institution and then at Queen's University Belfast, qualifying with Honours in 1921. In 1922 he became a house physician and house surgeon in the Royal in Belfast. In 1923 he was appointed house physician at the West London Hospital in Hammersmith and later became a registrar in the same hospital. He engaged in postgraduate study at the National Hospital for Paralysed and Epileptic in Maida Vale, the National Hospital Queen Square, St. George's, St Bartholomew's and Charing Cross Hospitals. In 1924 he obtained the degree of Doctor of Medicine with commendation and was elected a member of the Royal College of Physicians of London. He was a young man in a hurry and after just 4-5 months working for Dr Grainger Stewart in Maida Vale having had time to obtain his MD degree and his MRCP he went to a private hospital in North Wales called Ruthin Castle run by Dr (later Sir) Edmond Spriggs. There were only four to five on the medical staff and Dr



Figure 6. Dr Sydney Allison

Allison was appointed as an assistant physician. This hospital received only very wealthy patients. Many of them had neurotic conditions. Some had neurological illnesses.

During his time in North Wales he obtained a grant from the Medical Research Council to investigate “The incidence, frequency, distribution and other aetiological factors of the patients with disseminated sclerosis in North Wales”. This led to a publication in “Brain”. This was the first population-based study ever published on multiple sclerosis.⁷

In 1930 he was appointed to the medical staff of Royal Victoria Hospital in Belfast and became a visiting physician to Clarendon Street Hospital in 1939. It is interesting that he competed with Hilton Stewart and Howard Crozier for the position on the staff of the Royal Victoria Hospital. Sydney Allison in his private diaries wrote that the obvious candidates were Stewart and Crozier. A female relative of one of the members of the board of the Royal Victoria Hospital, Henry Berrington had been unwell and had been treated in Ruthin Castle by Spriggs. John Allison remembers his father saying he was particularly attentive and solicitous to the well-connected lady from Belfast.

In those days it was expected that applicants for positions on the staff of the Royal Victoria Hospital would canvas support. Though we do not know the details of Sydney Allison’s approaches to members of the Board of Management, an amusing account of this process is detailed in the recently published biography of Sir Ian Fraser.⁸ Though Henry Berrington supported Allison’s application, Spriggs at the time was in the USA and the resourceful Allison got him to send a telegram of support. In any case, Sydney Allison was appointed, and Hilton Stewart had to wait for 26 years until 1956 before he was appointed to the visiting staff of the Royal. Sydney enjoyed working with his colleague Hilton Stewart. He was more of an organic neurologist than Stewart. Hilton Stewart was what we would now call a neuropsychiatrist. He was interested in neurosis, psychosis and depression, treating middle class patients who felt they would have been stigmatised by attending psychiatry clinics. Sydney writes that his friend Hilton Stewart had a flair for administration, and he gladly left that to him.

Sydney Allison was always interested in the sea and the navy. As a medical student he spent a year in the Royal Navy as a surgeon probationer on a destroyer. A book detailing his memories was published

based on his diaries.⁹ The great influenza epidemic wiped out many of the crew and made a profound impression on him. Before becoming a houseman in the Royal Victoria Hospital he spent a year at sea in the merchant navy with the Blue Funnel Line in the Far East. He became a Surgeon Lieutenant in the Royal Naval Volunteer Reserve (RNVR) – Ulster Division on HMS Caroline in 1925.

EARLY NEUROSURGERY AND CECIL CALVERT

From the time of his appointment to the Royal, Allison conducted teaching demonstrations in neurology for students attending the hospital. There was no specialist appointment in neurology, nor was there a specialist neurosurgeon. Mr GRB Purce was a general surgeon in the Royal with an interest in thoracic and neurosurgery. In the Royal in 1930 the list of neurosurgical operations performed contains the following: removal of brain tumours, 2 (died 2); removal of cerebral cyst, 1; cerebral abscess, 1 (died 1); laminectomy, 1 (died 1). Purce gradually abandoned neurosurgery.

During the 1930’s Cecil Calvert was developing an interest in neurosurgery. Sydney Allison and Cecil Calvert got on well. Cecil Calvert spent his days practising general surgery in nursing homes to earn his living. He also practised general surgery in the Royal. It was his preference to operate on neurosurgical cases at night. He was a careful, meticulous surgeon, but memorably slow. In those days haemostasis within the head was difficult. Sydney Allison frequently assisted at operations. Beginning at 8.30 to 9.30pm, the operations invariably went on into the small hours of the night. The surgical outcomes gradually improved. It must be remembered that in those days none of the modern diagnostic aids were available. The preoperative assessment was based almost entirely on the bedside methods, using the clinical history and the careful consideration of the neurological examination.

THE WAR AND POST-WAR PERIOD

At the start of the Second World War the admiralty called up Sydney Allison employing him as a medical specialist. His wartime experiences are recorded in a paper published after his death by his son John based on his diaries.¹⁰ At Barrow Gurney near Bristol he was placed in charge of a 40-bed neurology ward. In 1944 he was appointed senior medical officer in command Royal Naval Neurological Hospital at Stonehouse, Plymouth, carrying the rank of Surgeon Captain RNVR (one of just three reservists to achieve that rank). Early

in the war, during quieter postings, he studied for a qualification in psychiatry, the DPM.

After discharge from the Navy, on his return to Belfast he found that his colleagues were “still in the mind-set of 1939”. Those who had not been to the war, and were in powerful positions in medicine felt that things would settle down and return to the pre-war state. Sydney Allison found this attitude infuriating. He was approached to become honorary secretary of the medical staff in 1947. At that time Professor WWD Thomson was chairman of the medical staff. There was a mutual regard. They were also near neighbours in University Square. Allison lived at number 27 and Thomson at number 25. Before the inauguration of the National Health Service, this was Belfast’s equivalent of Harley Street. Incidentally, Cecil Calvert lived at number 8 University Square. An interesting account of the medical occupants of University Square is to be found in Dr Strain’s presidential address to the Ulster Medical Society in 1968.¹¹

Sydney Allison expressed a desire to Prof WWD Thomson that he wished to become a full time neurologist. Thompson initially was against this but later actively facilitated him. He writes “many of my friends thought I was being foolish, and to stake all on the success of a new venture such as neurology was courting disaster. It did not seem proper or justifiable to take over one of the general medical wards and stuff it with neurological cases,” and “neglecting other aspects of medicine”. He was also convinced that neurological cases required specialist nursing. He felt such patients would be better gathered under the care of nurses skilled and practised in the care of neurological diseases.

Cecil Calvert joined the Royal Army Medical Corps in 1940. His expertise in neurosurgery resulted in a posting to Oxford, attached to St Hugh’s Hospital for head injuries. This pioneering unit was run by Sir Hugh Cairns, later Nuffield professor of Neurosurgery in Oxford.

While he was the honorary secretary to the staff Sydney Allison actively promoted the concept of neurology and neurosurgery working more closely together. There was no neurosurgery unit. He also became interested in the development of the hospital. Two tours of European hospitals were made. The first was to France and Switzerland in May 1947, and the second to Denmark and Sweden in June and

July. These countries had escaped the worst ravages of World War II.

Cecil Calvert, before the war, had developed an interest in neurosurgery. A year before the introduction of the Health Service, in 1947 he was appointed a full time neurosurgeon with a salary of £1,500 per year. This freed him of the necessity to earn his living practising general surgery. He was also permitted to see private neurosurgical cases. 25 beds were allocated to him in wards 11 & 12 in the old Royal corridor. In 1948 there was a further development. A decision was made to establish a department of neurology in the Royal with Sydney Allison as physician in charge, the appointment being on the same terms as Calvert’s. Allison and Calvert brought their needs to the hospital Management Committee, which was chaired by Senator Herbert Quin. The upshot of this planning was that Quin House was to be redeveloped to accommodate neurology and neurosurgery. On the ground floor were thirty-five beds, a theatre suite, and an X-ray department run by Dr Harold Shepherd, who had been appointed in 1950. There was also a room for EEG equipment. On the second floor were sixteen beds for neurology. The advantage of having a special unit was the development of a team of specialised nurses. The close collaboration between medical, nursing and physiotherapy staff greatly benefited the patients, after the unit was opened.

Sydney Allison continued his interest in MS by involving Harold Millar in a major epidemiological study. This was published in a supplement (*fig 7*) to the *Ulster Medical Journal* in 1954.¹² It is perhaps the most frequently cited paper ever published in the journal. The reason for this is that the simple diagnostic criteria that they proposed were not superseded for twenty years. All papers on the epidemiology of MS for nearly thirty years quoted the Allison and Millar criteria.

In 1950 it was clear that a new matron of Claremont Street should be appointed. Sydney Allison went to Queen Square and forged a formal link with the National Hospital for Nervous Diseases. The matron of Queen Square, Miss Marjorie Ling was appointed matron of Claremont Street Hospital and despite the distance visited Belfast regularly. Many of the nurses from Claremont Street benefited from periods of training in Queen Square. Miss Ruby Moore was her deputy, and acting matron.

Also in 1950, Belfast City Hospital advertised sessions for consultant neurologists. Sydney Allison

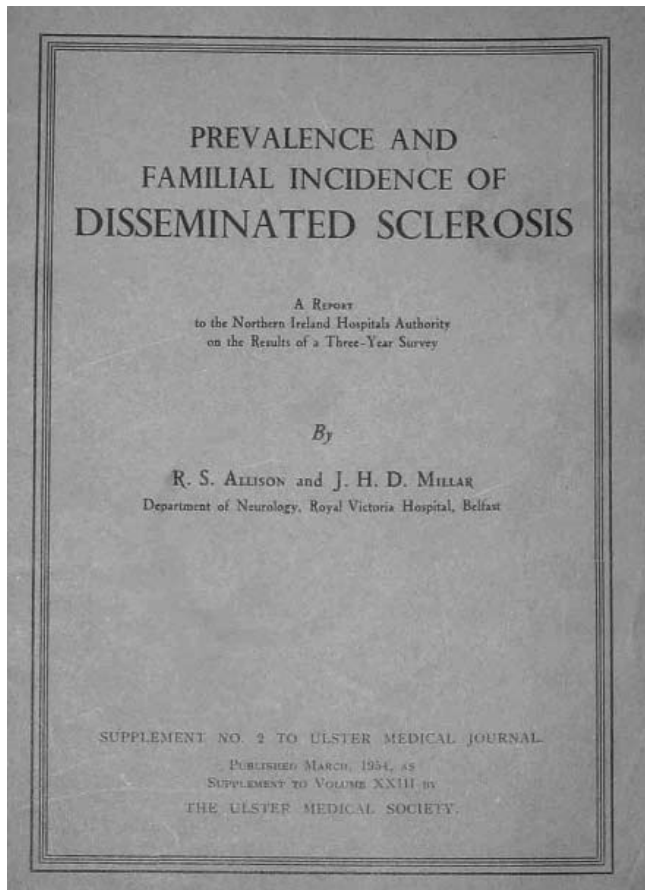


Figure 7. Cover, Ulster Medical Journal supplement on MS

and Hilton Stewart were appointed. There were 15 beds, and a neurological presence twice a week.

The extension to Quin House was opened 1953 when Sydney Allison was on sabbatical in London. Sydney spent the months from September to December of 1953 working with Dr McDonald Critchley in the National Hospital, Queen Square. Incidentally Critchley also served in the RNVR during the war. The fact that they were both naval men no doubt helped their friendship. The collaboration resulted in a book called the "Senile Brain", published in 1962.¹³ Allison's presidential address to the Ulster Medical Society in 1969 was heavily influenced by Critchley's researches on the parietal lobes.¹⁴

Cecil Calvert died tragically as the result of a car accident at Ballygawley in 1956. At that stage there was one other neurosurgeon on the staff – Mr Alec Taylor, a Scot, had been appointed in 1952. Mr Campbell Connolly had been appointed in 1950 but resigned in 1952 to take up a post in Birmingham. Mr Colin Gleadhill, an Englishman who had trained in Dublin was appointed to succeed Cecil Calvert in 1957. Mr Derek Gordon a very young man at the time of Cecil Calvert's death was appointed in 1960.

Before his appointment as a consultant he gained further surgical experience in Boston.

During 1957 Sydney Allison went to the USA at the request of Dr Leonard Kurland who was working at the NIH in Bethesda at the time. The invitation came after a chance meeting at a conference in Chicago in 1956 where Sydney had presented the results of his survey of MS in Northern Ireland. He was encouraged to study the prevalence of MS in Charleston, South Carolina and Halifax, Nova Scotia, assisted by a young Dr Milton Alter. Milton Alter still has fond memories of his association with the Allison family, and recalls visiting Belfast in the late 1950's. In September 1957 Dr and Mrs Allison set off on board a liner to New York. Derek and Mavis Gordon happened to be on the same ship en route to Boston. This cemented a lasting friendship. Louis Hurwitz who was in New York at the time went to

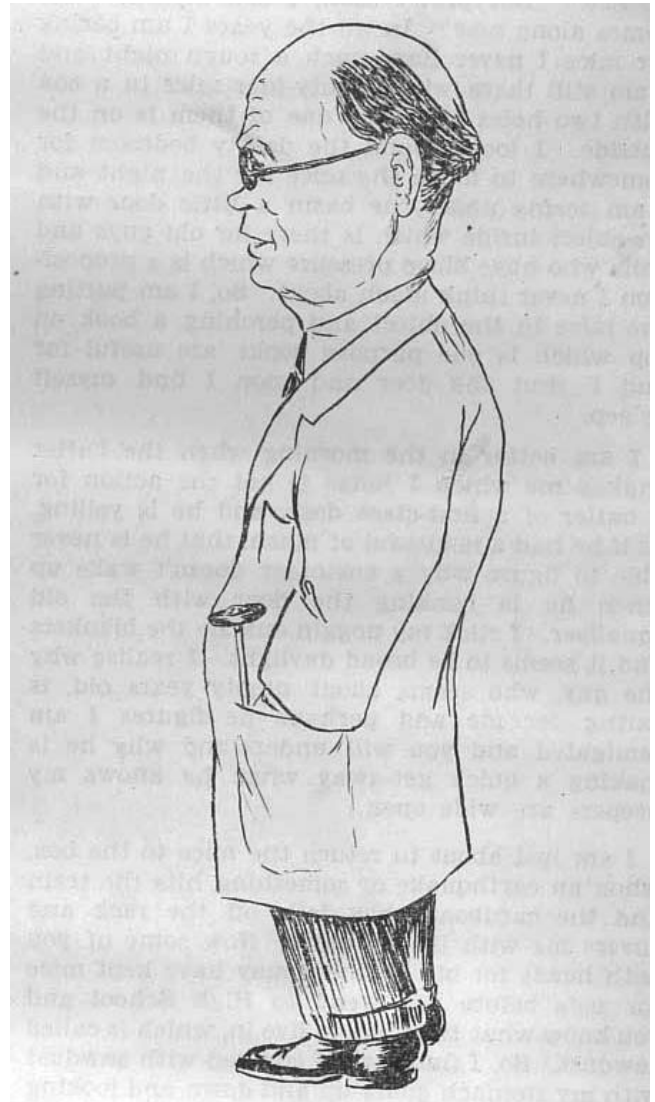


Figure 8. Cartoon from 'Snakes Alive' 1957

visit him in Charleston. Later the Allison's spent four days in New York over Christmas with Louis and his boss Dr Wolff in Cornell before returning home by air to London on Boxing Day. In 1957 Sydney was honoured by a tribute in "Snakes Alive", the usually disrespectful journal of the Belfast Medical Students Association. (fig 8)

From 1966-1968 Allison served as President of the Association of British Neurologists. During his presidency he hosted a meeting of the association in Belfast. Following his retirement he worked as Honorary Archivist in the Royal Victoria Hospital, publishing an extensive history of the hospital "The Seeds of Time".¹⁵ (fig 9)

Derek Gordon was a gifted surgeon, who in his maturity was a great ambassador for Belfast. He was to serve as the President of the Society of British Neurological Surgeons. In the 1970's and 1980's he, Colin Gleadhill, Ian Bailey and three young registrars – Alan Crockard, Tom Fannin and Dermot Byrnes put Belfast neurosurgery on the map. The fact that Quin House was adjacent to the casualty department and the intensive care unit was influential in their pioneering work on head injuries in the early days

of the civil war (in all but name) on the streets of West Belfast.

DR HAROLD MILLAR

Harold Millar was born in Belfast, the eldest son of Samuel Dundee Millar, a resident of Bangor, and a jam manufacturer and company director. Sheila Millar told me his friends on the Bangor train called Samuel "Lord Preserve-Us". Harold was educated at Elm Park Preparatory School in County Armagh and from the age of fourteen at Campbell College, Belfast. He studied medicine at Queen's University Belfast 1935-1940. After qualifying he became house physician at the Royal Victoria Hospital for six months, (fig 10) and could have become fully registered on the strength of that, but he then moved to be a house surgeon at Plymouth General Hospital where one of his friends was working in Greenbank Hospital. His friend told him they were short of doctors there at the time. As a consequence he experienced at first hand the effects the blitz of the naval base. Images of that remained etched on his memory for the rest of his life.

Harold had three brothers and one sister. Along with all his brothers he volunteered for His Majesty's Forces in 1941. He served as surgeon lieutenant in the Royal Naval Volunteer Reserve until 1946. His first experience was in minesweepers and destroyers

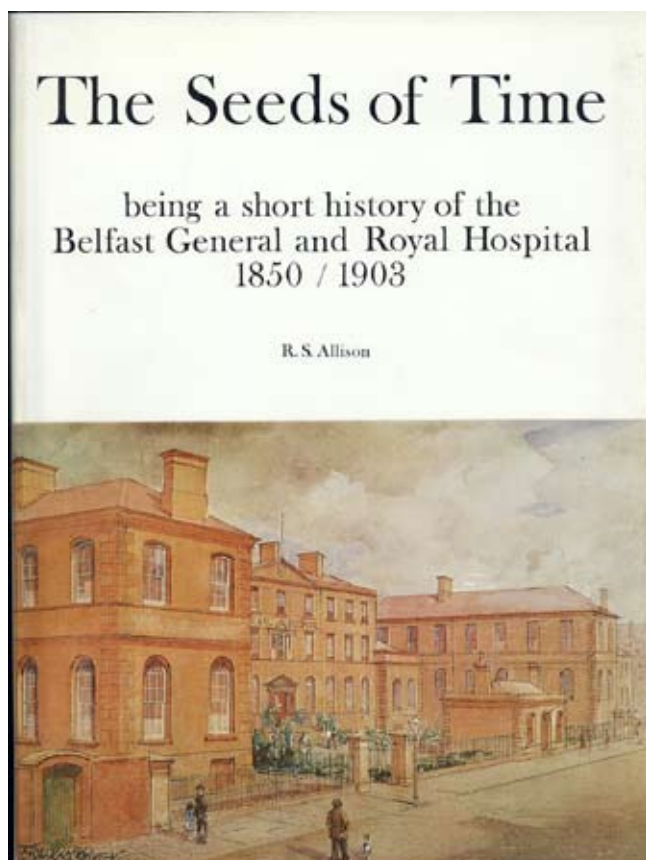


Figure 9. Cover, "The seeds of Time"



Figure 10. Dr Harold Millar

in the Atlantic, then in the arctic convoys. The arctic convoys helped to supply the Russian allies with munitions and were particularly hazardous. U-boats lay in wait in Norwegian fjords. If a ship was torpedoed in winter, sailors overboard faced almost certain death from hypothermia.

Having survived several arctic convoys, he told me he applied for a course in tropical medicine. His application was successful and he spent the last two years of the war in the Far East, based in Ceylon. He had happy memories of “sundowners” in Trincomalee. Late in his life, shortly before he died, he received a campaign medal from the Soviet Government in recognition of his wartime service. This pleased and amused him for he carried with him all his life the memory of harrowing experiences on the Murmansk convoys.

After the war he returned to Belfast to pursue post-graduate education. He quickly obtained the MD with commendation and the MRCP in London, one of the first of his generation following the war. As a registrar at the Royal Victoria Hospital he became interested in neurology. He went to the National Hospital for Nervous Diseases, Queen Square, London in 1947-1948, as a supernumerary registrar to study electro-encephalography (EEG). In 1950 he married Sheila who had trained as a nurse in the Middlesex Hospital, and later trained as a social worker. She was the daughter of Robert Hugh Clay, Regional Director of the Post Office in Northern Ireland. They had three sons and two daughters of whom one son and one daughter qualified as doctors.

In 1952 he was appointed Consultant Neurologist at the Royal Victoria Hospital and Claremont Street Hospital for Nervous Diseases in Belfast. He was also visiting neurologist at the Belfast City Hospital, Thompson House (home for the long-term disabled at Lisburn) Killowen Hospital for Epilepsy (Lisburn), Tyrone County General Hospital, Omagh and the Erne Hospital, Enniskillen, – a heavy and greatly dispersed clinical commitment. He was the senior neurologist in Belfast for over 25 years, and continued to work full time until he was sixty-five.

Harold Millar was a gifted clinical neurologist who greatly enhanced the reputation of neurology in Northern Ireland. His clinical acumen was remarkable. Ward rounds started in Quin house on Monday mornings on the dot of nine o'clock. They were conducted at considerable speed, frequently being completed by nine thirty, when he would travel down the main corridor of the

Royal to perform consultations in other wards, and thence to the medical library. His house staff were frequently astonished at his mercurial ability to spot significant clinical signs from the end of the bed. His diagnostic skill was legendary, rather like a gifted mathematician who could leave out several lines of a complex calculation and still end up with the correct answer.

His abiding passionate interest in multiple sclerosis (MS) remained with him until he died. Between 1948 and 1952 he carried out an epidemiological survey of MS in Northern Ireland with Sydney Allison.⁷ This was one of the first studies of its kind to be performed anywhere and was regarded as a model for other subsequent studies. He founded a register of MS in Northern Ireland that he maintained.

In 1971 he was invited to write the monograph on MS on the “American Lecture Series” published by CC Thomas in Springfield, Illinois.¹⁶ To this he gave the sub-title “A Disease Acquired in Childhood”. This arose out of the interest at that time in a possible relationship between MS and measles, following the discovery of measles virus in cases of subacute sclerosing panencephalitis. He had a conviction that MS will eventually turn out to be an infectious disease.

Harold Millar felt that specialists should not lose touch with general medicine. His breadth of interests was apparent in the range of his papers on many aspects of general medicine, in addition to his many contributions to the neurological literature. He produced papers on platelet stickiness in cerebrovascular disease in diabetes, the neurological manifestations of systemic carcinoma, amino-aciduria and the EEG, on epilepsy, subarachnoid haemorrhage and cerebral tumours. In 1956 with colleagues he described for the first time in Britain a family with Refsum's Disease, a rare autosomal recessive enzyme defect resulting in failure to metabolise phytanic acid, presenting clinically with a mixed polyneuropathy, blindness and deafness.

He was a benign teacher who preferred to guide by example. If there were an occasion when something did not please him, he would merely chuckle and say “How extraordinary!” At academic meetings he was less benign and did not hesitate to pursue a debatable point with vigour but again with good humour. In 1977 he was appointed Honorary Reader in Neurology at Queen's University. He was elected President of the Association of British Neurologists from 1979-1980. Harold Millar was a modest man

who did not tolerate pretension. He had a warm outgoing personality with a great sense of humour. He was gregarious, a generous host, a fisherman and a former captain of the Royal Belfast Golf Club at Craigavad.

When he retired from the National Health Service in 1982 he kept up his active interest in research on MS and although his health was deteriorating continued to live life to the full at his farm in the County Down countryside. At all times he was supported by his wife Sheila, his constant companion and together they continued visiting MS patients in their homes as well as holding annual tea parties, fund raising, barbecues and barn dances (*fig 11*).

Of all his many clinical attachments he was particularly fond of his work at Claremont Street



Fig 11. Barbeque in Dr Millar's garden from left to right, Dr M Swallow, Dr T Beringer, Dr S Hawkins, Fiona Hawkins, Dr H Miller.

Hospital, in a warm friendly and efficient atmosphere with small band of dedicated nurses. He was very upset when Claremont Street Hospital was closed a short time after his retirement. Claremont Street was based on a row of Victorian terrace houses. It became increasingly difficult to provide modern medical and nursing care. It was under threat of closure for ten years. The highly skilled band of nurses helped to postpone the inevitable through their dedication. Sydney Allison in his diaries wrote in the 1960's that it was difficult at times to practice modern medicine there.

DR LOUIS HURWITZ

Lewis John Hurwitz (*fig 12*) was born on 9th February 1926. In later life he always signed his name and was known to most of his friends as Louis. The youngest child of Barney Hurwitz, for many years president of the Jewish community in Belfast, he went to school at Belfast Royal Academy where he showed academic and athletic promise. He won the Girdwood Cup (for a best all-round performance in track events) on two occasions. He entered Queen's University medical school graduating in 1949.

His first appointment was House Physician to the newly formed Department of Neurology at the Royal Victoria Hospital under Dr Sydney Allison. He showed a remarkable aptitude for the careful clinical assessment of neurological cases. Sydney Allison encouraged this. He subsequently held a house physician post at Claremont Street Hospital and Killowen Hospitals. Later he held appointments in Liverpool and Bradford in general medicine. In 1951 he spent a year in the Department of Pathology of the Queen's University Belfast gaining a BSc in 1952 and an MD in 1953. In 1954 he became registrar in the Department of Neurology and passed the MRCP of Edinburgh in 1955.

Having decided to make his career in neurology he went to London and spent two years as Resident House Physician at the National Hospital for Nervous Diseases, Queen Square. In 1957 he was awarded a scholarship to work on cerebral vascular disease at Bellevue Hospital, New York and became Assistant Director of the Neurological Services at Cornell University with John Foster Kennedy who was from Belfast and was a student at the Belfast Medical School. Returning to Queen Square in 1959 he spent a year as Senior Registrar in the outpatient department. In 1960 he won a Ciba Travelling Fellowship that took him to Paris where he worked with Professor Garcin at the Hôpital de la Salpêtrière. He absorbed much of the clinical expertise of the French neurologists and took to his heart their style of clinical demonstrations in teaching. In 1961 he was appointed Lecturer at the Institute of Neurology in London. During this time he worked with Dr Purdon Martin on cases of post-encephalitic Parkinson's disease in the Highlands Hospital where 130 patients were resident. A publication in *Brain* resulted from this collaboration.¹⁷ The following year he returned to Belfast as Consultant Neurologist to the Royal Victoria Hospital, Claremont Street Hospital and Belfast City Hospital.



Figure 12. Dr Louis Hurwitz

Louis had infectious enthusiasm and boundless intellectual energy. This is exemplified by the work on subacute sclerosing panencephalitis. It was his conviction that measles was to blame. The young Ingrid Allen had confirmed the diagnosis in three cases of SSPE. He pursued the virologists. Fortuitously the techniques of immunofluorescence and immunohistochemistry had been recently introduced to Belfast. Measles antigen and antibody were discovered, resulting in one of the most cited papers ever.¹⁸ John Connolly talked with pride of a special note to that effect in *Excerpta Medica* in the 1980's. The contribution of Dame Ingrid Allen to Belfast neurosciences is legendary. The full account of her achievements is beyond this short paper. She was awarded the DBE as a result of her original research and her contributions to national and international committees.

Louis Hurwitz was a member of the Association of British Neurologists, The Association of Physicians of Great Britain and Ireland and the Louis Rapkine Association. He was Honorary Secretary of the Ulster Neuro-Psychiatric Society from 1962-1971 and a founder member of the Irish Neurological Association. He served on the council of the section of neurology of the Royal Society of Medicine of London and the Royal Academy of Medicine in Ireland.

During the last two years of his life he experienced a series of heart attacks. He was encouraged to curtail his clinical activities, but his research work continued with unabated enthusiasm. He held several grants from the Medical Research Council, for work on diabetic neuropathy, amino-aciduria in relation to myopathy and to establish a register of muscular dystrophy in Northern Ireland.

He was an inspirational enthusiastic teacher. The students elected him President of the Belfast Medical Students' Association (1965-1966). His contributions to neurology in Belfast and his keen interest in teaching, particularly of undergraduates, were rewarded by an appointment as Honorary Lecturer at Queen's University shortly before his death in 1971. His wife, Natalie was also medically qualified. They had two sons and a daughter. Following his death Dr Natalie Hurwitz returned to England to work in Leeds in the student health service. After his death, Michael Swallow published a volume of selected papers with a complete bibliography.¹⁹

He died when I was a medical student in my final year. In those days clinical demonstrations in neurology and neurosurgery for students were conducted on Thursday afternoons, Friday afternoons at 5pm in Claremont Street and on Saturday mornings in the Royal. These classes were attended by an enthusiastic band of students even on Saturdays. Students from the country would postpone trips home so as not to miss the classes.

Dr Michael Swallow was appointed to succeed Sydney Allison in 1964. A graduate of the University of London and the Westminster Hospital he had been inspired to adopt a career in clinical neurology by Dr Swithin Meadows, a consultant neurologist with an interest in neuro-ophthalmology. While he was a house physician to MacDonald Critchley, Dr Sydney Allison was at Queen Square on sabbatical. Michael was impressed. Louis Hurwitz was also at Queen Square at the time. Friendships were formed, so when the post in Belfast became available, he applied. Michael Swallow graced the department until his retirement in 1988. A gifted teacher of undergraduate and postgraduate students, he developed interests in neuro-ophthalmology, rehabilitation, Parkinson's disease, and muscle disease. His clinical practice included the Royal, Claremont Street, Belfast City Hospital, and units for chronically disabled in Musgrave Park and Thompson House in Lisburn. He also travelled to

Altnagelvin and Coleraine hospitals to conduct regular outreach clinics. A facet of neurology that particularly interested him was the assessment and management of disabled children and adults with multiple handicaps.

As a boy, Michael was a chorister in the choir school of Westminster Abbey. At the start of the Second World War, the choir school was evacuated to Christ's Hospital School at Horsham. After two years when it was obvious the war was going to be prolonged, the choir was temporarily disbanded. Michael applied for a place in the choir school in Magdalen College School, Oxford. At the end of his schooling, Michael was torn between a career in music and a career in medicine. He became a medical student, but has had a passion for music all his life. In Belfast, he has enjoyed leading amateur musical productions in a wide range of styles from oratorio to jazz. The choirmaster of the Royal Victoria Hospital Choir for many years, he has also been associated with the St George's Singers and the Ulster Orchestra. He has enriched the cultural life of Belfast in very many respects, serving on the Arts and the Environment Committee in the Royal and the Northern Ireland Arts Council. An interest in music therapy has enabled him to combine neurology, rehabilitation and music.



Figure 13. Dr Jo Lyttle's retirement party 1996

Dr John (Jo) Lyttle (*fig 13*) was appointed to succeed Dr Louis Hurwitz after his premature death. A son of the manse, he was brought up in rural setting in Ballyroney, Co Down, and was educated at Campbell College and Queen's University. Having obtained an MD in cardiology, Jo switched to neurology. Then he spent some time in Queen Square before returning to Belfast, where he developed a large practice.

Jo developed an interest in cerebral vascular disease, and participated in international therapeutic trials of transient ischaemic attacks and stroke. He retired in 1996, and was replaced by two neurologists, Dr Tom Esmonde and Dr Michael Watt.

I joined neurology in 1974 as a registrar. Mrs Ruth Baker, a daughter of Sydney Allison, published a contemporaneous account of Claremont Street Hospital in that year.²⁰ Claremont Street was closed in early 1986, and at the same time the inpatient beds in Belfast City Hospital. Beds for acute inpatient neurological investigations were all aggregated in Quin House. Thus ended the first century of neurology in Belfast. It will be for someone else to write the next chapter.

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